PTO/SB/17 (10-08)

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PEEE TRANSMITTAL	Eff	Complete if Known							
For FY 2009    First Named Inventor   Sepple SARNA				Application Nur	nber	10/598,606-Conf. #7736			
For FY 2009    First Named Inventor   Sepple SARNA	FEE TRANSMITTAL			Filing Date		December 14, 2006			
Application Type  Fee CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Application Type 1. Sand Entity 1.				First Named Inv	entor :	Seppo SARNA			
METHOD OF PAYMENT (check all that apply)    Check   Credit Card   Money Order   Nonc   Other (please identify):	FOIFI ZUUS			Examiner Name		M. L. Borin			
Check   Credit Card   Money Order   None   Other (plasse identify):	X Applicant claims small entity status. See 37 CFR 1.27			Art Unit	1631				
Check Credit Card Money Order None Other (ploase identify):    X   Deposit Account   Deposit Account Number   Q2-2448   Deposit Account Number   Birch, Stewart, Kolasch & Birch, LLP	TOTAL AMOUNT OF PAY	Attorney Docket No. 0933-0284PUS1							
X   Deposit Account   Deposit Account Number   Q2-2448   Deposit Account Name   Birch, Slewart, Kolasch & Birch, LLP	METHOD OF PAYMENT (check all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s) indicated below, except for the filling fee (e)   Charge fee(s)   Charge fee(s)   Charge fee(s)   Ee(s)	Check Credit Card Money Order None Other (please identify):								
Charge fee(s) indicated below    Charge fee(s) indicated below, except for the filing fee	x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
X   Charge any additional fee(s) or underpayments of   X   Credit any overpayments	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Telegian   Under 37 CFR 1.16 and 1.17   Telegian   Te	x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Application Type									
Papel	FEE CALCULATION								
Papellication Type	1. BASIC FILING, SEAF	· ·							
Application Type		FIL	"		EXAMIN				
Design   220   110   100   50   140   70	<b>Application Type</b>	<u>Fee (\$)</u>			Fee (\$)		Fees P	aid (\$)	
Plant	Utility	330	165 540	270	220	110			
Reissue	Design	220	110 100	50	140	70			
Provisional   220   110   0   0   0   0   0   0	Plant	220	110 330	165	170	85			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissucs) Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  or HP =   x   =   Fee Paid (\$)   Multiple Dependent Claims  or HP =   x   =   Fee Paid (\$)   Multiple Dependent Claims  or HP =   x   =   Fee Paid (\$)   Fee Paid (\$)    HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)   Fee Paid (\$)    HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings uncler 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    - 100 =   /50 =   (round up to a whole number) x   =    4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity) discount) Other (e.g., late filing surcharge): 2251 Extension for response within first month   65.00	Reissue	330	165 540	270	650	325			
Fee (\$)   Fee (\$)   Fee (\$)	Provisional	220	110 0	0	0	0			
Each claim over 20 (including Reissues)  Each lindependent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)	2. EXCESS CLAIM FEES Small Entity								
Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)	Fee Description Each claim over 20 (including Reissues)								
Total Claims    Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims	•					İ			
- or HP =	Multiple dependent claims 390						195		
Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  - or HP =	Total Claims	Extra Claims	Fee (\$) Fe	ee Paid (\$)	Multiple Depende		ent Claims		
Indep. Claims					Fee	<u>e (\$)                                    </u>	ee Paid (\$)	,	
- or HP =	_	•	_				***************************************	_	
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	·	Extra Claims		ee Paid (\$)					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets		pendent claims p						ĺ	
Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    -100 =   /50 =   (round up to a whole number) x   =	listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
- 100 = /50 = (round up to a whole number) x = //4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 2251 Extension for response within first month 65.00  SUBMITTED BY  Registration No. (Attorney/Agent) 30,330 Telephone (858) 792-8855				` /	12 41- · · · · ·	r = - //\	Ess D	mint (d)	
A. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 2251 Extension for response within first month  SUBMITTED BY  Registration No. (Attorney/Agent) 30,330 Telephone (858) 792-8855							<u>ree r</u>	<u>aiu (ఫ)</u>	
Other (e.g., late filing surcharge): 2251 Extension for response within first month  SUBMITTED BY  Registration No. (Attorney/Agent) 30,330 Telephone (858) 792-8855	4. OTHER FEE(S)  Fees Paid (\$)								
SUBMITTED BY  Registration No. (Attorney/Agent) 30,330 Telephone (858) 792-8855								65.00	
Registration No. (Attorney/Agent) 30,330 Telephone (858) 792-8855									
	Signature	Vien	2	_	30,330	Telephone	(858) 792	-8855	
						Date March 16, 2009			